Organization ID # 0656691 State of origin KY Filing fee \$115.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0656691.09

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Michael G. Adams Kentucky Secretary of State

Received and Filed: 10/25/2022 2:47 PM Fee Receipt: \$115.00

RST

Date (Required)

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Reinstatement Application and Reinstatement Annual Report For the year 2022

Exact organization name and principal office address
VARNAN MANUFACTURING, INC.
5036 LEXINGTON ROAD
PARIS KY 40361

Registered Agent and Registered Office Address

Signature of officer Or chairman of the board (Required)

MINDY MINER COOK 5036 LEXINGTON ROAD The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at https://web.sos.ky.gov/ftsearch or can be downloaded from our website.

PARIS, KY	′ 40361		
	is included in a parent company's Ker	tucky tax return as a disregarde	t
company's information FEIN:			
- EIIV	Name:		·
		ent officers. All organizations must list at least one (1) of ations are required to list a Secretary or other officer ser	
Sole Officer	MINDY M COOK		
	name And address of all directors (if applicable to the principal office address.	e).No listing of directors Is verification that the corporation	n has dispensed with directors. If Not specified,
MINDY M COOK			
The undersigned sta	ates that the grounds for dissolution	tober 4, 2022 because the entity did not filn n either did not exist or have been elimina ok in the amount of \$115.00, payable to Ke	ted, and the entity's name satisfies the
Under penalty of pe information pertaini 271B.14-220.	rjury, the below signed hereby authing to VARNAN MANUFACTURING	norizes the Kentucky Department of Rever i, INC. to the Secretary of State, as require	nue to release any applicable tax ed for reinstatement pursuant to KRS
If not an officer of s	aid entity, please provide a Declara	tion of Power of Attorney with the Reinsta	tement Application.
X Muide	Good	Pus	10-17-22

Title (Required)

Website: www.revenue.ky.gov Phone: 502-564-8139 Fax: 502-564-0058

October 25, 2022

0656691

VARNAN MANUFACTURING, INC. 5036 LEXINGTON ROAD **PARIS KY 40361**

Notice Date:

KY SoS Org. ID:

RE: Letter of Good Standing Request - Approved

SUMMARY

You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.

OUR DETERMINATION

We verified the following information.

- 1. You are registered with the Department of Revenue.
- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.

This notice will remain current for 30 days from the notice date above.

- WHAT YOU NEED TO DO 1. If you are attempting to reinstate your entity, please provide a copy of this letter to the Kentucky Secretary of State within 30 days of the notice date above.
 - 2. If you are a for-profit corporation, you will also need to provide the Secretary of State a letter of good standing from the Division of Unemployment Insurance. Their telephone number is 502-564-6835.
 - 3. If you are a non-profit entity, please remember to file a copy of your tax returns with the Kentucky Attorney General. The charity filing requirements website is: http://ag.ky.gov/family/consumerprotection/ charity/Pages/registration.aspx.

CONTACT INFORMATION

If you have any questions regarding this notice, please contact me. Thank you.

Agent: Dottye REV3769, Taxpayer Specialist I

Email: Dottye.Roberts@ky.gov

Direct: 502-564-0102



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 https://kewes.ky.gov UITax@KY.GOV

KRS 14A.7-030(1)(f) CERTIFICATE

The Office of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Samantha Tabor
Office of Unemployment Insurance
PO Box 948
Frankfort, Kentucky 40602-0948
Phone: (502) 564-2272
Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0656691

